

CONSENT AND CONFIDENTIALITY

HELPING VICTORIA'S YOUNG PEOPLE ACCESS HEALTH CARE

The Victorian Government is making sure young people receive the health support, advice and treatment they need to reach their full potential.

The \$43.8 million Doctors in Secondary Schools program is delivering on the Government's election commitment to fund general practitioners (GPs) to attend 100 Victorian Government secondary schools to provide medical advice and health care to those students most in need.

This brochure provides answers to commonly asked questions about access to this service.

CAN YOUNG PEOPLE CONSENT TO MEDICAL TREATMENT FROM A GP THEMSELVES?

Victorian law is clear on consent for medical treatment by a GP:

- Young people who are mature minors can consent to their own medical treatment.
- Young people who are not mature minors cannot consent to their own medical treatment.

In the case of the Doctors in Secondary Schools program, it will be the GP who will assess if a young person is a mature minor with respect to the issue for which they are seeking medical treatment. As in standard medical practice, the GP assesses the maturity of the young person and decides if that young person is a mature minor and has the ability to consent to their own medical treatment.

WHAT IS A MATURE MINOR?

Mature minors are young people under the age of 18 years who are deemed capable by a GP of seeking and obtaining health care for their particular issue. To give informed consent, a young person must be able to understand what treatment involves, what it is for, why it is needed and why it applies to them as an individual. The young person must also appreciate the risks associated

with the treatment and be aware of the other options available, as well as the consequences of not pursuing treatment.

WHAT IF A YOUNG PERSON IS NOT A MATURE MINOR?

In the case of the Doctors in Secondary School program, any young person who wants to make an appointment to see the GP can do so. The GP will decide if the young person is a mature minor with respect to the issue for which they are seeking medical treatment. If the GP decides the young person is not a mature minor, their parents or carers will be informed and their consent will be sought prior to commencing any treatment.

The assessment as to whether a young person is a mature minor may vary for different issues. For example, a GP may decide a young person is mature enough to be able to consent to treatment for a health condition such as asthma, but may not be mature enough to discuss the risks and benefits of anti-depressant medication.

CAN PARENTS OR CARERS ATTEND APPOINTMENTS WITH THE GP AS SUPPORT?

Yes, parent and carer involvement is encouraged if the young person consents.

CAN TEACHERS OR OTHER YOUNG PEOPLE ATTEND APPOINTMENTS WITH THE GP AS SUPPORT?

This will need to be considered on a case by case basis, in consultation with the young person seeking the medical treatment.

WHAT IF A PARENT OR CARER DOESN'T WANT THEIR CHILD TO SEE THE GP?

Parents should be informed about the Doctors in Secondary Schools program through school communications when the program commences in the school and also at the beginning of each school year. Information about the program should also be included on the school's website where possible.

If a parent informs the school that they do not want their child to access the GP at school the School Program Lead/principal should consider whether the student is a mature minor for the purposes of seeing the GP. They should also consider the reasons the parent has given. The Legal Division can be contacted for further advice.

As a general rule, **all** secondary school aged students will be considered mature enough to make a decision to see the GP and the GP will then decide whether the student is a mature minor for the purposes of seeking medical treatment for the presenting issue. If the School Program Lead is in any doubt about whether a particular student is a mature minor for the purposes of making an appointment to see the GP, they should consult with relevant school staff. They must also consult with the GP (without disclosing the student's identity, unless this is with consent).

If a young person attends the GP and is considered a mature minor by the GP, they can consent to that treatment without the consent of their parent or carer. If the young person is not a mature minor, the GP will seek consent for medical treatment from the parents or carers prior to proceeding with any treatment.

The aim of this program is to improve access to primary care for young Victorians. School staff should encourage parents and carers to discuss the following points with their children:

- Young people are able to seek medical treatment from a GP – depending on their level of maturity and the medical issue, this may be done with or without the consent of their parents or carers.
- GPs, including GPs participating in the program encourage parents or carers to be involved when required, or with the consent of the young person. This is the same as any general practice in the community.

WHAT CAN SCHOOLS DISCLOSE TO PARENTS AND CARERS?

In accordance with privacy obligations, school staff must not disclose to a parent or carer that their child has

accessed the GP, or has made an appointment with the GP, unless it is with the consent of the young person, or there are some other legal reasons for the disclosure of this information, for example, the student is not a mature minor.

WILL THE GP SHARE INFORMATION WITH THE REST OF THE WELLBEING TEAM?

Conversations between the GP and the young person will be confidential and not shared with others (including the wellbeing team at the school) unless:

- it is with the consent of the young person (if they are a mature minor), or his/her parents or carers (if the young person is not a mature minor); or
- the disclosure is otherwise permitted or required by the law.

The following are examples of when the GP may share information with the wellbeing team at the school:

- The young person consents to the disclosure.
- The disclosure is necessary to prevent a serious threat to public health, safety or welfare – e.g. the young person has an infectious disease and the disclosure is necessary to limit or prevent the impact that this may have on others in the school community.
- The disclosure is necessary to lessen or prevent a serious and imminent threat to any person's health, safety or welfare, such as:
 - *The young person is at imminent risk of harming themselves; or*
 - *The young person is at imminent risk of harming others.*

WHEN CAN YOUNG PEOPLE GET THEIR OWN MEDICARE CARDS?

Young people can apply for their own Medicare card when they turn 15 years of age. They need to complete an application form and provide identification, such as a student card or birth certificate, as well as details about the card they are transferring from.

WHAT DOES MEDICARE DISCLOSE TO PARENTS AND CARERS?

If the student's name is on their parent's Medicare card or the student has a duplicate card, parents will usually have access to their child's Medicare records. If the student is under the age of 14 years, then Medicare does not need the student's permission to disclose information about past visits to a GP. It is important that students are aware of this access to information that parents have through Medicare (covered in the **Information Sheet** for students).

HOW OFTEN WILL GENERAL PRACTITIONERS ATTEND THE SCHOOL?

GPs engaged in the program will attend the school up to once a week.

WILL THE GP MAKE REFERRALS?

Yes. It is anticipated that referrals will be an important part of this program. The school program lead and nurse will work with the young person and the GP (and the parents and carers in appropriate circumstances) to help facilitate any referrals.

HOW DO WE MANAGE CONSENT IF THE YOUNG PERSON IS IN OUT OF HOME CARE?

If the young person is a mature minor, he or she can consent to their own medical treatment.

If the young person is not considered a mature minor by the GP, consideration will need to be given to any relevant Court Orders and living arrangements. Consent to medical treatment should be made by people with parental responsibility. Where the young person has been placed in out-of-home care as a result of the Children's Court order, who has parental responsibility will depend on the order. The school may have a copy of an instrument of authorisation enabling the carer to make certain decisions. These will usually include routine medical care. If it is not clear who has parental responsibility for the young person, the relevant child protection office will be able to assist.

WHAT IF THE YOUNG PERSON MOVES SCHOOLS? WHAT HAPPENS TO THEIR MEDICAL RECORDS?

The young person's medical records will remain in the possession of the participating GP's base clinic.

If a young person moves schools, they (if they are a mature minor) or their parents or carers (if they are not a mature minor) will need to determine whether they will continue to see the GP from the Doctors in Secondary Schools program at their base clinic, or whether they would like to seek medical treatment from another GP.

If the young person or their parents or carers would prefer to see a different GP, the young person's medical records can be transferred to the new GP. This reflects what is currently undertaken in the broader community. This is important and encouraged, so that continuity of care is promoted across all the health providers a young person sees.

For more information please visit:

<http://www.education.vic.gov.au/about/programs/health/pages/doctors-secondary-schools.aspx>

or email Doctors in Secondary Schools at: doctors.in.schools@edumail.vic.gov.au with any questions.